1411628

FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Num	ber:	3235-0076				
Expires:	Apı	il 30,2008				
Expires: April 30,2008 Estimated average burden						
hours per response16.00						

SEC (JSE ONLY
Prefix	Serial
DATE	RECEIVED
1	1

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Ark Leisure Group, Inc. 90-Day Convertible Note and Warrant Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE CECCED
Type of I ming. Note I ming. Note I ming.	CESSED EC Mail Processing
A. BASIC IDENTIFICATION DATA	Section Section
1. Enter the information requested about the issuer	CON DELITEDOAPR 16 2008
Name of Issuer (check if this is an amendment and name has changed, and indicate change THOM Ark Leisure Group, Inc.	SON KEGIEKS
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Menum Hear Cod)
PO Box 6669, Branson MO 65615	417-239-1180
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Entertainment industry development	
Type of Business Organization	
X corporation ☐ limited partnership, already formed ☐ other (p) ☐ business trust ☐ limited partnership, to be formed	lease specify): 08046450
Actual or Estimated Date of Incorporation or Organization: Month Year	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D o 77d(6).	r Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	A notice is deemed filed with the U.S. Securities slow or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplied be filed with the SEC.	t the name of the issuer and offering, any changes ied in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sa ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law. this notice and must be completed.	ecurities Administrator in each state where sales the exemption, a fee in the proper amount shall
- ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal ex appropriate federal notice will not result in a loss of an available state exemption unlessifiling of a federal notice.	

							·		
			A. BASIC IDE	NTI	FICATION DATA				
2. Enter the information re	equested for the fol	llowing	; :						
 Each promoter of 	the issuer, if the is:	suer ha	s been organized w	ithin 1	the past five years;				
 Each beneficial ow 	vner having the pow	er to vo	ote or dispose, or dir	ect th	e vote or disposition	of, 10	% or more o	fa clas	ss of equity securities of the issuer
Each executive of	licer and director o	f corpo	rate issuers and of	corpo	rate general and man	aging	partners of	f partn	ership issuers; and
	managing partner o								
					-1 0.00				
Check Box(es) that Apply:	X Promoter	X	Beneficial Owner	$\overline{\mathbf{x}}$	Executive Officer	X	Director	لـا	General and/or Managing Partner
Full Name (Last name first,	if individual)								
Volich, Greg									
Business or Residence Addre	ess (Number and	Street,	City, State, Zip Co	de)					
260 Birdcage Walk, Hollist	ter. MO 65672								
Check Box(es) that Apply:	X Promoter	[3]	Beneficial Owner	X	Executive Officer	X	Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								
Scribner, Paul									
Business or Residence Addre	ess (Number and	Street,	City, State, Zip Co	de)			•		
260 Birdcage Walk, Hollis	ter, MO 65672								
Check Box(es) that Apply:	X Promoter	X	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								
Barker, John									
Business or Residence Addre	ess (Number and	Street,	City, State, Zip Co	de)					
260 Birdcage Walk, Holli	ster, MO 65672								
Check Box(es) that Apply;	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)								······································
Business or Residence Addre	ess (Number and	Street	City, State, Zip Co	de)					
	(,	7,	,					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)				 				
Business or Residence Addre	ess (Number and	Street	City, State, Zip Co	de)					
2011/20 61 1(0)/2011/01 1124((1,1,1,1,0,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1	····,	0.1, 0.1.1.5, 2.p. 0.1	,					
Check Box(es) that Apply:	Promoter	П	Beneficial Owner	П	Executive Officer	П	Director		General and/or
	0			_		_			Managing Partner
Full Name (Last name first,	if individual)								
,									
Business or Residence Addre	ess (Number and	Street,	City, State, Zip Co	de)					
			-						
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first	if (ndividual)			-					

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Business or Residence Address (Number and Street, City, State, Zip Code)

					B. 11	NFORMAT	ION ABOU	T OFFERL	NG				
1	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										Yes	No □	
1.	Answer also in Appendix, Column 2, if filing under ULOE.									***************************************	FZ	لننا	
2.												\$_10,000	
	Does the offering permit joint ownership of a single unit?											Yes	No
3.												X	
4.	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
		Last name	first, if indi	ividual)				-					
	V/A	Residence	Address (N	lumher and	Street C	ity State 7	in Code)	<u> </u>			.		······
Du	3111033 01	Residence	71001C35 (14	шиост шк	a bircoi, O.	ny, blaic, i	np code)						
Na	me of Ass	sociated Br	oker or De	aler							<u> </u>		
Sta			Listed Has									•	
	(Check	"All States	s" or check	individual	States)		****			***************************************		☐ All States	
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Fu	II Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	: Address (1	Number an	d Street, C	City, State,	Zip Code)						
Na	me of Ass	sociated Bi	oker or De	aler		<u> </u>			<u> </u>				
Sta	ates in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	indiviđual	l States)				************			☐ Al	I States
	AL IL MT RI	AK IN NE SC	IA NV SD	KS NII TN	CA KY NJ TX	CO LA NM UT	ET ME NY VT	DE MD NC VA	DC MA ND WA	FI. MI OII WV	GA MN OK WI	MS OR WY	MO PA PR
Fu	ll Name (Last name	first, if ind	ividual)	. 1			•					
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)				***		
Na	me of Ass	sociated B	roker or De	aler									
Sta	utes in Wh	nich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers	•					
	(Check	"All State:	s" or check	individual	l States)	•••••			************				I States
	AL IL MT RI	AK IN NE SC	AZ IA NV (SD)	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OII WV	GA MN OK WI	III MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C: OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check	:			
	this box and indicate in the columns below the amounts of the securities offered for exchange and	I			
	already exchanged.	Aggregate		Α	mount Already
	Type of Security	Offering Pri	ce		Sold
	Debt	s		\$_	<u>.</u>
	Equity	S		\$_	
	Common Preferred				
	Convertible Securities (including warrants)	S 200,000.00		\$_	70,000.00
	Partnership Interests	s		\$_	
	Other (Specify)	\$			
	Total				70,000,00
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	;			Aggregate Pollar Amount of Purchases
	Accredited Investors			\$_	
	Non-accredited Investors	2		\$_	70,000.00
	Total (for filings under Rule 504 only)			\$	70,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.				
		Type of		I	Dollar Amount
	Type of Offering	Security			Sold
	Rule 505			\$_	
	Regulation A			\$_	
	Rule 504		_	-	82,500.00
	Total			\$_	82,500.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$_	
	Printing and Engraving Costs	************		\$_	
	Legal Fees		N	\$_	2,000,00
	Accounting Fees			\$_	
	Engineering Fees				
	Sales Commissions (specify finders' fees separately)				
	Other Expenses (identify)			\$_	
	Total			-	2,000,00

	C: OFFERING PRICE, NUM	ABER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offe and total expenses furnished in response to Part C — proceeds to the issuer."	ering price given in response to Part C — Question 1 — Question 4.a. This difference is the "adjusted gross		\$_68,000.00
5.	each of the purposes shown. If the amount for a	roceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross of C — Question 4.b above.		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[] \$	\$
	Purchase, rental or leasing and installation of ma	achinery		
			_	_
	• .	acilities]\$	□ \$
	Acquisition of other businesses (including the va offering that may be used in exchange for the assistant to a merger)	alue of securities involved in this sets or securities of another	¬\$	
			_	-
	• •		_	_
		·-		
		[. U ^g
	Column Totals		₫\$	\$ 68,000.00
	Total Payments Listed (column totals added)		<u> </u>	00.000
*		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by th nature constitutes an undertaking by the issuer to fu	ne undersigned duly authorized person. If this notice urnish to the U.S. Securities and Exchange Commiss occedited investor pursuant to paragraph (b)(2) of R	sion, upon writte	
lss	uer (Print or Type)	Olgnature 1	Date	11 000
A	RK LEISURE GROUP, INC.	111/2	April	4,2008
Vа	me of Signer (Print or Type)	Tine of Signer (Print or Type)		
P	AUL A. SCRIBNER	PRINCIPAL, FINANCE AND OPERATIONS, DI	RECTOR	
-	······································	<u> </u>		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E STATE SIGNATURE							
1.		R 230.262 presently subject to any of the disqualification	Yes	No [X]					
		See Appendix, Column 5, for state response.							
2.	The undersigned issuer hereby un D (17 CFR 239.500) at such tim	idertakes to furnish to any state administrator of any state in which es as required by state law.	this notice is filed a no	otice on Form					
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4.	limited Offering Exemption (UL	ts that the issuer is familiar with the conditions that must be sati OE) of the state in which this notice is filed and understands that a of establishing that these conditions have been satisfied.							
	uer has read this notification and kno thorized person.	ows the contents to be true and has duly caused this notice to be sign	ned on its behalf by the	undersigned					
Issuer (Print or Type)	Signature Dat	April 4, 2	008					
ARK I	LEISURE GROUP, INC.	711/2	17 11 17						
Name (Print or Type)	Title (Print or Type)							
PAU	L A. SCRIBNER	PRINCIPAL, FINANCE AND OPERATIONS, DIREC	CTOR						

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX				
1	Intend to non-ac investors (Part B-	to sell	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pur	4 investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	SON CONTRACT								
AK									
AZ)							
AR							- 11-11		
CA	a de la composition della comp								
СО						_			00 000000 00000
СТ									
DE									
DC	·								
FL	Х		90-DAY CONVERTIBE NOTE AND WARRAN	E 0	0	Į.	70,000,00		X
GA									
HI									
ID	0.0000000000000000000000000000000000000								
IL									
IN									
IA									
KS									
KY				<u>-</u>					(
LA									
ME									
MD									
МА									
MI									
MN	and the same of th								
MS									

APPENDIX 1 2 3 4 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate Type of investor and explanation of to non-accredited offering price amount purchased in State waiver granted) investors in State offered in state (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Non-Accredited Accredited Yes No State Yes No Investors Amount Investors Amount 90-DAY CONVERTIBLE 20,000,00 X 0 МО 0 Х NOTE AND WARRANT MT NE NV NH NJ NM NY NC ND ОН OK OR PA RI SCSD TN TX UT VTVA WA wν WΙ

	APPENDIX											
1	2 3 Type of security and aggregate offering price offered in state (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1)			4 Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
PR												

END